

Corres, and Mail

Amendment Under 37 C.F.R. § 1.116 Group Art Unit 2674, Expedited Procedure

Docket No. 03500.013035.

In re Application of:

YOSHIHIRO TERASHIMA

Application No.: 09/177,572

Filed: October 23, 1998

For: MEMORY CONTROLLER AND LIQUID

CRYSTAL DISPLAY APPARATUS

USING THE SAME

Mail Stop AF Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Examiner: K.M. Nguyen

Group Art Unit: 2674

Date: April 15, 2004

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APR 2 2 2004

Technology Center 2600

Transmitted herewith is an Amendment After Final Action in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE *	ADDITIONAL FEE
TOTAL	* 2	MINUS	** 20	= 0	x \$9 \$18	\$0.00
INDEP. ·CLAIMS	* 1	MINUS	***	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—						\$0.00

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.					
	A check in the amount of \$ is enclosed.					
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed					
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.					
X	A check in the amount of \$_110.00\] to cover the fee for a one- month extension is enclosed.					
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.					
X	Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.					
	Respectfully submitted,					
	Attorney for Applicant Registration No. 47,138					

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

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